Please type a plus sign (+) inside this box	\rightarrow	+

PTO/SB/01 (10-00) Approved for use through 10/31/2002 OMB 0651-0032
Patent and Trademark Office U S DEPARTMENT OF COMMERCE

S105-USA

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number

Attorney Docket Number

DECLARATION FOR UTI	LITY OR Fi	irst Named Invento	r					
DESIGN		COMPLETE IF KNOW			VN			
PATENT APPLICATION		Application Number		/				
(37 CFR 1.63)	F	Filing Date		·		-		
Declaration Declaration Submitted OR Submittee		Group Art Unit						
with Initial Initial Filing Filing (su (37 CFR	rcharge p	Examiner Name						
As a below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated below next to my name I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: VIDEO PROCESSING METHODS FOR IMPROVING VISUAL ACUITY AND/OR PERCEIVED IMAGE								
the specification of which Is attached hereto OR was filed on (MM/DD/YYYY) as United States Application Number or PCT International								
Prior Foreign Application		that of the application on which priority is claimed. Foreign Filing Date Priority Certified Copy Attact						
					YES	NO		
Additional foreign application num						eto.		
I hereby claim the benefit under 35 U Application Number(s)		(MM/DD/YYYY)	application	ni(s) liste	SU DEIOW			
60/207,529	05	5/26/2000	Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.					
		[Page 1 of 2]						

Burden Hour Statement This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231 DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to:	Customer Nu or Bar Code I				OR .	Correspondence address below
Name Lee Jay Mandell 28284 PATENT TRADEMARK OFFICE						
Address P.O. Box 905						
Address				· -		
City Santa Clarita				State	CA	ZIP 91380-9005
Country U.S.A.	try U.S.A. Telephone (661) 775-3995 Fax (661) 775-1595					Fax (661) 775-1595
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.						
NAME OF SOLE OR FIRST I	NVENTOR:			A petiti	on has been fi	ed for this unsigned inventor
Given Name (first and middle [if any]) Robert J. Family Name or Surname						
Inventor's Signature Date \$/7/0 (
Residence: City Los Angeles			State CA	W	Country U.S.A	Citizenship U.S.A.
Mailing Address 1600 S. Bentley Ave	. #7					
Mailing Address						
City Los Angeles	State CA			ZIP 900	025	Country U.S.A.
NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any]) Richard P. Family Name or Surname Williamson						
Inventor's Signature Date May 4,2001						
Residence: City Sherman Oaks			State CA		Country U.S.A.	Citizenship Canada
Mailing Address 4617 Willis #10						
Mailing Address						
City Sherman Oaks State CA ZIP 91403 Country U.S.A						
Additional inventors are being named on						

Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number

DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 2

Name of Addition	onal Joint Inventor, if any: A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])						Family Na	ame or	Surname
Joseph H.	H. Schulman							
Inventor's Signature	Joseph	V.	Be	li	M	m		Date 5 - 201
Residence: City	Santa Clarita	State	CA CA		Country	U.S.A.		Citizenship U.S.A.
Mailing Address	16050 Comet Way							
Mailing Address								
City	Santa Clarita	State	e CA		ZiP 9	91351	Count	try U.S.A.
Name of Addition	nal Joint Inventor, if an	ıy:			A petitio	n has been file	ed for t	his unsigned inventor
Given Na	ame (first and middle [if any	/])				Family Na	me or	Surname
Reza P.	Rassool							
Inventor's Signature	Date 5/7/20						Date 5/7/2001	
Residence: City	Stevenson Ranch	State	CA		Country	U.S.A.		Citizenship U.K.
Mailing Address								
Mailing Address					•			
City	Stevenson Ranch	State	e CA		ZIP	91381	Cou	intry U.S.A.
Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor							his unsigned inventor	
Given Name (first and middle [if any]) Family Name or Surname						Surname		
Lee J.				Mand				
Inventor's Signature	Lee J.	m	enle	ill				Date 5-4-0/
Residence: City	West Hills	State	CA	С	Country	U.S.A.		Citizenship U.S.A.
Mailing Address	7944 Marquand Ave							
Mailing Address								
City	West Hills	State	CA		ZIP	91304	,	Country U.S.A.

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time—you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231 DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS—SEND TO: Assistant Commissioner for Patents, Washington, DC 20231

PTO/SB/02A (11-00) Approved for use through 10/31/2002 OMB 0651-0032

Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number

DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>2</u> of <u>2</u>

Name of Addition	Additional Joint Inventor, if any:						this unsigned inventor	
Given Na	Given Name (first and middle [if any]) Family Name or Surname						Surname	
Abraham N.	Seidman							
Inventor's Signature	alluna 91.	5	Elm	un				Date 05/04/2001
Residence City	Beverly Hills		te CA		Countr	y U.S.A.		Citizenship U.S.A
Mailing Address	220 S. Doheny Dr. #11	· P	.0. Bo	<u>x 16</u>	603	Bevenly	14.11	ls, (A 90209
Mailing Address								
City	Beverly Hills	Sta	te CA		ZIP	90209 9 0211	Count	try U.S.A.
Name of Addition	nal Joint Inventor, if any	<i>y</i> :			A petit	ion has been file	d for t	this unsigned inventor
Given Na	ame (first and middle [if any])				Family Nar	me or	Surname
Inventor's Signature								Date
Residence: City		State	:e		Country	<u>/</u>		Citizenship
Mailing Address								
Mailing Address							<u> </u>	
City		Sta	te	,	ZIP		Cou	intry
Name of Additional Joint Inventor, if any:							his unsigned inventor	
Given Name (first and middle [if any]) Family Name or Surname						Surname		
Inventor's Signature								Date
Residence: City		State	9		Country Citizen			Citizenship
Mailing Address								
Mailing Address								
City		State			ZIP		,	Country

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231 DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

POWER OF ATTORNEY

Docket No.

S105-USA

Name of Applicant:

Greenberg, et al.

Address of Applicant: P.O. Box 905

Santa Clarita, California 91380-9005

Title:

VIDEO PROCESSING METHODS FOR IMPROVING VISUAL ACUITY AND/OR

PERCEIVED IMAGE RESOLUTION

Serial No., if Any:

Filed:

TO THE ASSISTANT COMMISSIONER FOR PATENTS

The Assistant Commissioner for Patents Washington, D.C. 20231

Honorable Sir:

I hereby appoint:

Lee Jay Mandell, Reg. No. 37,176

as principal attorneys to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

Please direct all future correspondence to:

By:

Lee Jay Mandell Second Sight, LLC

P.O. Box 905

Santa Clarita, California 91380-9005

(661) 775-3995

(661) 775-1595 fax

Robert J. Greenberg

President of Second Sight, LLC

Dated:

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

N
ij.
T.
T
e
1

STATEMENT CLAIMING SMALL ENTITY STATUS (37 CFR 1.9(f) & 1.27(c))SMALL BUSINESS CONCERN	Docket Number (Optional) S105-USA				
Applicant, Patentee, or Identifier: Greenberg, et al. Application or Patent No.: Filed or Issued: Title: <u>VIDEO PROCESSING METHODS FOR IMPROVING VISUAL ACUITY AND/OR</u>	PERCEIVED IMAGE				
I hereby state that I am the owner of the small business concern identified below: an official of the small business concern empowered to act on behalf of the concern identified below:	dentified below:				
NAME OF SMALL BUSINESS CONCERN SECOND SIGHT, LLC					
ADDRESS OF SMALL BUSINESS CONCERN P.O. Box 905, Santa Clarita, California 9	1380-9005				
I hereby state that the above identified small business concern qualifies as a small b in 13 CFR Part 121 for purposes of paying reduced fees to the United States Patent and Travelated to size standards for a small business concern may be directed to: Small Bus Standards Staff, 409 Third Street, SW, Washington, DC 20416.	ademark Office. Questions				
I hereby state that rights under contract or law have been conveyed to and remain with identified above with regard to the invention described in: the specification filed herewith with title as listed above. the application identified above. If the rights held by the above identified small business concern are not exclusive, organization having rights in the invention must file separate statements as to their status as to the invention are held by any person, other than the inventor, who would not qualify as ar 37 CFR 1.9(c) if that person made the invention, or by any concern which would not qualify under 37 CFR 1.9(d), or a nonprofit organization under 37 CFR 1.9(e). Each person, concern, or organization having any rights in the invention is listed below: no such person, concern, or organization exists.	each individual, concern, or s small entities, and no rights n independent inventor under as a small business concern				
Separate statements are required from each named person, concern or organization having rights to the invention stating their status as small entities. (37 CFR 1.27) I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance					
NAME OF PERSON SIGNING Robert J. Greenberg TITLE OF PERSON IF OTHER THAN OWNER President					
ADDRESS OF PERSON SIGNING P.O. Box 905, Santa Clarita, California 91380-9005					
SIGNATURE	5/7/01				